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| B1 (Official Point 1) (4/10)   |   | <u>L</u>  | Jucument                                    | Page 1  | . 01 40  |   |                           |   |
|--|---|---|---|---|--|---|---------------------------|---|
|  |   | NKRUPTCY  |   |   |  | VOL   | UNTARY PE                 | TITION  |
| Name of Debtor (if individual, enter Last, First, Middle):<br>Lewis, Tiffany S   |   |   |   | Name of Jo  | Name of Joint Debtor (Spouse) (Last, First, Middle):   |   |                           |   |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):   |   |   |   |   | All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):   |   |                           |   |
| Last four digits of Soc. Sec. or Individual-Ta<br>(if more than one, state all):<br>3875   |   |   | mplete EIN                                  | Last four di<br>(if more tha  | igits of Soc. Se<br>an one, state all  | c. or Individual-T<br>l):                         | axpayer I.D. (            | ITIN)/Complete EIN  |
| Street Address of Debtor (No. and Street, Ci<br>4152 W . Congress<br>Chicago IL 60624  | ty, and Star  | te):  | ***************************************     | Street Addr   | ess of Joint De  | ebtor (No. and Stre                               | eet, City, and S          | State):   |
| County of Residence or of the Principal Plac   | ce of Busin   |   | CODE  | County of I   | Residence or o   | f the Principal Plac                              | ce of Business            | ZIP CODE  |
| COOK  Mailing Address of Debtor (if different from   | n street add  | ress):  | <del></del>                                 |   |  | Debtor (if differen                               |                           |   |
|  | 1 000 _   |   |   | 112411111   | divos 61   | -   | .і. ПОШ эпер              | aaress).  |
| Location of Principal Assets of Business Del   | •   | ZIP (   | CODE  |   |  |   |                           | ZIP CODE  |
|  | otor (11 um   | erent from si   | reet address above)                         | j:  |  |   |                           | ZIP CODE  |
| Type of Debtor (Form of Organization)  | -   |   | Nature of Busin<br>(Check one box           |   |  | Chapter of Bank<br>the Petition is                |                           | Under Which   |
| (Check one box.)  ☐ Individual (includes Joint Debtors)  ☐ See Exhibit D on page 2 of this form.  ☐ Corporation (includes LLC and LLP) ☐ Partnership ☐ Other (If debtor is not one of the above entities, check this box and state type of entity below.) ☐ Health Care Busine ☐ Single Asset Real E ☐ 11 U.S.C. § 101(51) ☐ Railroad ☐ Stockbroker ☐ Commodity Broker ☐ Clearing Bank ☐ Other |   | gle Asset Real Estat<br>U.S.C. § 101(51B)<br>ilroad<br>ckbroker<br>mmodity Broker<br>aring Bank | te as defined in                            | Cha   | Nonmain Proceeding   |   |                           |   |
|  |   | Othe  | er  |   | Nature of Debts (Check one box.)   |   |                           |   |
|  | Tax-Exempt Ent (Check box, if applie  Debtor is a tax-exempt of under Title 26 of the Ur Code (the Internal Rever |   |   | Debts are primarily consumer debts, defined in 11 U.S.C. business debts.  § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." |  |   |                           | Debts are primarily   |
| Filing Fee (Cho  | eck one box   | x.)   |   | Check one l   |  | Chapter I1 I                                      | Debtors                   |   |
| <ul> <li>□ Full Filing Fee attached.</li> <li>☑ Filing Fee to be paid in installments (ar signed application for the court's consisurable to pay fee except in installments</li> </ul>   | ideration cer   | ertifying that t  | the debtor is                               | Debtoi Debtoi Check if: Debtoi  | Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).  Check if: |   |                           |   |
| Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.  |   |   |   | Check all ap  | pplicable boxen is being filed tances of the pl  | v three years there<br>es:<br>with this petition. | eafter) I prepetition fro | om one or more classes  |
| Statistical/Administrative Information   |   |   |   | -   | 11010, 11-   | dance mer   |                           | THIS SPACE IS FOR   |
| Debtor estimates that funds will be Debtor estimates that, after any ex distribution to unsecured creditors  | cempt prope   | for distributierty is exclud  | on to unsecured cre<br>led and administrati | ditors.<br>ive expenses pa  | id, there will b   | e no funds availab                                |                           | COURT US ONLY NORTH   |
|  | 0-999   | 1,000-<br>5,000   | 5,001- 1                                    | 10,001-   | □<br>25,001-<br>50,000   | 50,001-<br>100,000                                | Over 100,00               | T T J STATES BANKI HERN DISTRIC OCT 23  |
| \$50,000 \$100,000 \$500,000 to mi   | 00,001 5<br>\$1 t   | \$1,000,001<br>to \$10<br>million   | \$10,000,001 \$<br>to \$50 to               | \$50,000,001 \$<br>to \$100 t   | \$100,000,001<br>to \$500<br>million   | \$500,000,001<br>to \$1 billion                   | More than                 | UITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NORTHERN DISTRICT OF ILLINOIS OCT 23 2015 |
| \$50,000 \$100,000 \$500,000 to:   | 00,001 5<br>\$1 t   | \$1,000,001<br>to \$10<br>million   | \$10,000,001 \$ to \$50 to                  | 550,000,001 \$<br>50,\$100 1  | \$100,000,001<br>to \$500  | \$500,000,001<br>to \$1 billion                   | More than                 | OURT  |

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| Voluntary Petition   | Name of Debtor(s):   | rage 2                          |  |  |  |  |
|--|--|---------------------------------|--|--|--|--|
| (This page must be completed and filed in every case.)   | Lewis, Tiffany S   |                                 |  |  |  |  |
| All Prior Bankruptcy Cases Filed Within Last 8   |  | t.)                             |  |  |  |  |
| Location Where Filed:  | Case Number:   | Date Filed:                     |  |  |  |  |
| Location   | Case Number:   | Date Filed:                     |  |  |  |  |
| Where Filed:   |  |                                 |  |  |  |  |
| Pending Bankruptcy Case Filed by any Spouse, Partner, or A   |  | additional sheet.)              |  |  |  |  |
| Name of Debtor:  | Case Number:   | Date Filed:                     |  |  |  |  |
| District: Northern District of Illinois  | Relationship:  | Judge:                          |  |  |  |  |
| Exhibit A  | Exhibit  |                                 |  |  |  |  |
| (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)  | (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). |                                 |  |  |  |  |
| Exhibit A is attached and made a part of this petition.  | X  |                                 |  |  |  |  |
|  | Signature of Attorney for Debtor(s)  | (Date)                          |  |  |  |  |
| Exbit  | ait C  |                                 |  |  |  |  |
|  |  |                                 |  |  |  |  |
| Does the debtor own or have possession of any property that poses or is alleged to pose  | a threat of imminent and identifiable harm to pu   | blic health or safety?          |  |  |  |  |
| Yes, and Exhibit C is attached and made a part of this petition.   |  |                                 |  |  |  |  |
| ☑ No.  |  |                                 |  |  |  |  |
|  |  |                                 |  |  |  |  |
| Exhibit D  (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)  Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.   |  |                                 |  |  |  |  |
| Information Regarding the Debtor - Venue  (Check any applicable box.)  Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.  There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.  Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. |  |                                 |  |  |  |  |
| Certification by a Debtor Who Resides<br>(Check all appli  | as a Tenant of Residential Property cable boxes.)  |                                 |  |  |  |  |
| Landlord has a judgment against the debtor for possession of debt  | or's residence. (If box checked, complete the fo   | tlowing.)                       |  |  |  |  |
|  | (Name of landlord that obtained judgment)  |                                 |  |  |  |  |
|  | (Address of landlord)  | ·····                           |  |  |  |  |
| Debtor claims that under applicable nonbankruptcy law, there are entire monetary default that gave rise to the judgment for possessi   | circumstances under which the debtor would be on, after the judgment for possession was entere   | permitted to cure the<br>d, and |  |  |  |  |
| Debtor has included with this petition the deposit with the court of of the petition.  | Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing  |                                 |  |  |  |  |
| Debtor certifies that he/she has served the Landlord with this certi   | fication. (11 U.S.C. § 362(1)).  |                                 |  |  |  |  |

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B1 (Official Form) 1 (4/10) Page 3 Voluntary Petition Name of Debtor(s): Lewis, Tiffany S (This page must be completed and filed in every case.) Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this petition is true I declare under penalty of perjury that the information provided in this petition is and correct true and correct, that I am the foreign representative of a debtor in a foreign [If petitioner is an individual whose debts are primarily consumer debts and has proceeding, and that I am authorized to file this petition. chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 (Check only one box.) or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States Code. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I Certified copies of the documents required by 11 U.S.C. § 1515 are attached. have obtained and read the notice required by 11 U.S.C. § 342(b). Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States Code, chapter of title 11 specified in this petition. A certified copy of the specified in this petition order granting recognition of the foreign main proceeding is attached. X Signature of Pebto (Signature of Foreign Representative) X Signature of Joint Debtor 312-589-8600 (Printed Name of Foreign Representative) Telephone Number (if not represented by attorney) 10/08/2015 Date Date Signature of Attorney\* Signature of Non-Attorney Bankruptcy Petition Preparer Х I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as Signature of Attorney for Debtor(s) defined in 11 U.S.C. § 110, (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information Printed Name of Attorney for Debtor(s) required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a Firm Name maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. Address Telephone Number Printed Name and title, if any, of Bankruptcy Petition Preparer Date Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, \*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a responsible person or partner of the bankruptcy petition preparer.) (Required certification that the attorney has no knowledge after an inquiry that the information by 11 U.S.C. § 110.) in the schedules is incorrect. Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true Address and correct, and that I have been authorized to file this petition on behalf of the Х The debtor requests the relief in accordance with the chapter of title 11, United States Date Code, specified in this petition. Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. Signature of Authorized Individual Names and Social-Security numbers of all other individuals who prepared or Printed Name of Authorized Individual assisted in preparing this document unless the bankruptcy petition preparer is not an Title of Authorized Individual individual. Date If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person. A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment

or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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B6 Summary (Official Form 6 - Summary) (12/07)

## United States Bankruptcy Court

Northern District of Illinois

| In reTiffany S.Lewis | Case No.  |
|----------------------|-----------|
| Debtor               |           |
|                      | Chapter 7 |

### SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE  | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS    | LIABILITIES  | OTHER       |
|---|----------------------|---------------|-----------|--------------|-------------|
| A - Real Property   | YES                  | 1             | \$ 0.00   |              |             |
| B - Personal Property   |                      | 1             | \$ 700.00 |              |             |
| C - Property Claimed as Exempt  |                      | 1             |           |              |             |
| D - Creditors Holding<br>Secured Claims   |                      | 1             |           | \$ 0.00      |             |
| E - Creditors Holding Unsecured<br>Priority Claims<br>(Total of Claims on Schedule E) |                      | 1             |           | \$ 0.00      |             |
| F - Creditors Holding Unsecured<br>Nonpriority Claims                                 |                      | 4             |           | \$ 52,820.00 |             |
| G - Executory Contracts and<br>Unexpired Leases                                       |                      | 1             |           |              |             |
| H - Codebtors   |                      | 1             |           |              |             |
| I - Current Income of<br>Individual Debtor(s)   |                      | 1             |           |              | \$ 2,500.00 |
| J - Current Expenditures of Individual<br>Debtors(s)                                  |                      | 1             |           |              | \$ 3,000.00 |
| To  | OTAL                 | 13            | \$ 700.00 | \$ 52,820.00 |             |

B 6 Summary (Official Form 6 - Summary) (12/07)

## United States Bankruptcy Court

Northern District of Illinois

| In re <u>Tiffany S.Lewis</u> , Debtor | Case No.  |
|---------------------------------------|-----------|
|                                       | Chapter 7 |

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability  | Amount |      |
|--|--------|------|
| Domestic Support Obligations (from Schedule E)   | \$     | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)   | \$     | 0.00 |
| Claims for Death or Personal Injury While Debtor Was<br>Intoxicated (from Schedule E) (whether disputed or undisputed) | \$     | 0.00 |
| Student Loan Obligations (from Schedule F)   | \$     | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E                   | \$     | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar<br>Obligations (from Schedule F)                           | \$     | 0.00 |
| TOTAL  | s      | 0.00 |

State the following:

| Average Income (from Schedule I, Line 16)  | \$ | 2,500.00 |
|--|----|----------|
| Average Expenses (from Schedule J, Line 18)  | \$ | 3,000.00 |
| Current Monthly Income (from Form 22A Line 12; <b>OR</b> , Form 22B Line 11; <b>OR</b> , Form 22C Line 20) | s  | 2,500.00 |

State the following:

| 1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column               |         | \$<br>0.00      |
|--|---------|-----------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.            | \$ 0.00 |                 |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column |         | \$<br>0.00      |
| 4. Total from Schedule F   |         | \$<br>52,820.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)               |         | \$<br>52,820.00 |

B 1D (Official Form 1, Exhibit D) (12/09)

## UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

| In re Tiffany S Lewis | Case No.   |  |
|-----------------------|------------|--|
| Debtor                | (if known) |  |

# EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
- ☐ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.

| В | 1D | (Official | Form | 1, | Exh. | D) | (12/09) | -Cont. |
|---|----|-----------|------|----|------|----|---------|--------|
|---|----|-----------|------|----|------|----|---------|--------|

Page 2

□ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

- ☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

  ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);

  ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);

  ☐ Active military duty in a military combat zone.
- ☐ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

I certify under penalty of perjury that the information provided above is true and correct.

| Signature of Debtor: |  |
|----------------------|--|
| Date: 10/08/2015     |  |

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B6A (Official Form 6A) (12/07)

| In re | Tiffany S Lewis | Case No.   |
|-------|-----------------|------------|
|       | Debtor          | (If known) |

#### SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| DESCRIPTION AND<br>LOCATION OF<br>PROPERTY | NATURE OF DEBTOR'S<br>INTEREST IN PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION | AMOUNT OF<br>SECURED<br>CLAIM |
|--|--|---------------------------------------|--|-------------------------------|
|  |  |                                       |  |                               |
|  |  |                                       |  |                               |
|  |  |                                       |  |                               |
|  | To   | tal <b>&gt;</b>                       | 0.00   |                               |

(Report also on Summary of Schedules.)

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B 6B (Official Form 6B) (12/07)

| In re | Tiffany S Lewis | Case No.   |
|-------|-----------------|------------|
|       | Debtor          | (If known) |

### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether the husband, wife, both, or the marital community own the property by placing an "H," "W," "I," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF<br>DEBTOR'S INTEREST<br>IN PROPERTY, WITH-<br>OUT DEDUCTING ANY<br>SECURED CLAIM<br>OR EXEMPTION  |
|---|------------------|---|---------------------------------------|--|
| 1. Cash on hand.  | ×                |   |                                       |  |
| 2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.                       | x                |   |                                       |  |
| Security deposits with public utilities, telephone companies, landlords, and others.  | х                |   |                                       |  |
| Household goods and furnishings, including audio, video, and computer equipment.  |                  | 3 Rooms of furnishing                   |                                       | 600.00   |
| 5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.   | ×                |   |                                       |  |
| 6. Wearing apparel.   |                  | wearling clothing                       |                                       | 100.00   |
| 7. Furs and jewelry.  | x                |   |                                       |  |
| Firearms and sports, photographic, and other hobby equipment.   | ×                |   |                                       |  |
| Interests in insurance policies.     Name insurance company of each policy and itemize surrender or refund value of each.   | x                |   | # # # # # # # # # # # # # # # # # # # | State of the state |
| 10. Annuities. Itemize and name each issuer.  | x                |   |                                       |  |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | x                |   |                                       |  |

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B 6B (Official Form 6B) (12/07) -- Cont.

| In re | Tiffany S Lewis | , Case | e No       |
|-------|-----------------|--------|------------|
|       | Debtor          |        | (If known) |

## **SCHEDULE B - PERSONAL PROPERTY**

| TYPE OF PROPERTY   | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|--|------------------|---|---------------------------------------|--|
| 12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.  | x                |   |                                       | minasyan shari ya sakan ka                                     |
| Stock and interests in incorporated and unincorporated businesses.  Itemize.   | x                |   |                                       |  |
| 14. Interests in partnerships or joint ventures. Itemize.  | ×                |   |                                       |  |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.  | ×                |   |                                       |  |
| 16. Accounts receivable.   | x                |   |                                       |  |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.   | ×                |   |                                       |  |
| 18. Other liquidated debts owed to debtor including tax refunds. Give particulars.   | x                |   |                                       |  |
| 19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.       | ×                |   |                                       |  |
| 20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.   | x                |   |                                       |  |
| 21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | ×                |   |                                       |  |
|  |                  |   | 100.00                                |  |

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| In re | Tiffany S Lewis | , Case No. |
|-------|-----------------|------------|
|       | Debtor          | (If known) |

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

| TYPE OF PROPERTY  | N<br>O<br>N<br>E | DESCRIPTION AND LOCATION<br>OF PROPERTY | HUSBAND, WIFE, JOINT,<br>OR COMMUNITY | CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION |
|---|------------------|---|---------------------------------------|--|
| 22. Patents, copyrights, and other intellectual property. Give particulars.   | ×                |   |                                       |  |
| 23. Licenses, franchises, and other general intangibles. Give particulars.  | x                |   |                                       |  |
| 24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | x                |   |                                       |  |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.  | x                |   |                                       |  |
| 26. Boats, motors, and accessories.   | x                |   |                                       |  |
| 27. Aircraft and accessories.   | x                |   |                                       |  |
| <ul><li>28. Office equipment, furnishings, and supplies.</li><li>29. Machinery, fixtures, equipment,</li></ul>  | ×                |   |                                       |  |
| and supplies used in business.  | ×                |   |                                       |  |
| 30. Inventory.  | ×                |   |                                       |  |
| 31. Animals.  | x                |   |                                       |  |
| 32. Crops - growing or harvested. Give particulars.   | x                |   |                                       | :  |
| 33. Farming equipment and implements.   | x                |   |                                       |  |
| 34. Farm supplies, chemicals, and feed.   | x                | A-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 |                                       |  |
| 35. Other personal property of any kind not already listed. Itemize.  |                  |   |                                       |  |
|   |                  | continuation sheets attached Total      | <b>&gt;</b>                           | <b>\$</b> 700.00   |

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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|                                |       |                |                           |           |

| ln re | Tiffany S Lewis | • | Case No.   |
|-------|-----------------|---|------------|
|       | Debtor          |   | (If known) |

## SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under: | □ Check | k if debtor claims a homestead exemption that | at exceeds |
|---|---------|---|------------|
| (Check one box)   | \$155,6 | ,675.*  |            |
| □, 11 U.S.C. § 522(b)(2)  |         |   |            |
| 型 11 U.S.C. § 522(b)(3)   |         |   |            |

| DESCRIPTION OF PROPERTY  | SPECIFY LAW<br>PROVIDING EACH<br>EXEMPTION | VALUE OF<br>CLAIMED<br>EXEMPTION   | CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION  600.00 |  |
|--|--|--|---|--|
| 3 rooms of furniture   | 735 ILCS 5*12-1001(b)                      |  |   |  |
| wearing clothing   | 735 ILCS 5*12-1001(a)                      |  | 100.00  |  |
| a de trompa de como a constituir de la proposició de la como de la |  |  |   |  |
|  |  |  |   |  |
|  |  | MENTAL STATE OF THE STATE OF TH |   |  |
|  |  |  |   |  |
|  |  |  |   |  |
|  |  |  |   |  |
|  |  |  |   |  |
|  |  |  |   |  |

<sup>\*</sup> Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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B 6D (Official Form 6D) (12/07)

| In re Tiffany S Lewis , | Case No.   |
|-------------------------|------------|
| Debtor                  | (If known) |

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is the creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| CREDITOR'S NAME AND<br>MAILING ADDRESS<br>INCLUDING ZIP CODE AND<br>AN ACCOUNT NUMBER<br>(See Instructions Above.) | CODEBTOR                                | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED,<br>NATURE OF LIEN,<br>AND<br>DESCRIPTION<br>AND VALUE OF<br>PROPERTY<br>SUBJECT TO LIEN | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF CLAIM<br>WITHOUT<br>DEDUCTING VALUE<br>OF COLLATERAL | UNSECURED<br>PORTION, IF<br>ANY            |
|--|---|--|---|------------|--------------|----------|--|--|
| ACCOUNT NO.  |   |  |   |            |              |          | ,  |  |
| ACCOUNT NO.  |   |  | VALUE\$   |            |              |          |  |  |
| 4.0000000000000000000000000000000000000  |   |  | VALUE \$  |            |              |          |  |  |
| ACCOUNT NO.  |   |  | VALUE \$  |            |              |          |  |  |
| continuation sheets  | • | ·······                                  | Subtotal ►  | <b></b>    | L            | •        | \$   | \$   |
| attached   |   |  | (Total of this page)  |            |              |          | 0.00   | 0.00                                       |
|  |   |  | Total ►<br>(Use only on last page)  |            |              |          | \$ 0.00  | \$ 0.00                                    |
|  |   |  |   |            |              |          | (Report also on Summary of Schedules.)                         | (If applicable, report also on Statistical |

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.) Case 15-36051 Doc 1 Filed 10/23/15 Entered 10/23/15 11:58:58 Desc Main Document Page 14 of 40

B 6E (Official Form 6E) (04/10)

| In re Tiffany S Lewis | Case No(if known) |
|-----------------------|-------------------|
| Debtor                | (if known)        |

### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.  |
|---|
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.   |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)  |
| Domestic Support Obligations  |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| Extensions of credit in an involuntary case   |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).   |
| Wages, salaries, and commissions  |

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$11,725\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

#### Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

<sup>\*</sup> Amount subject to adjustment on 4/01/13, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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|--|---|
| In re Tiffany S Lewis Debtor   | , Case No (if known)  |
| Certain farmers and fishermen  Claims of certain farmers and fishermen, up to \$5,775* per farm  | mer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).           |
| Deposits by individuals  Claims of individuals up to \$2,600* for deposits for the purchathat were not delivered or provided. 11 U.S.C. § 507(a)(7). | se, lease, or rental of property or services for personal, family, or household use,  |
| Taxes and Certain Other Debts Owed to Governmental U   | Jnits d local governmental units as set forth in 11 U.S.C. § 507(a)(8).               |
|  | the Office of Thrift Supervision, Comptroller of the Currency, or Board of            |
| Governors of the Federal Reserve System, or their predecessors of \$507 (a)(9).  Claims for Death or Personal Injury While Debtor Was I              | or successors, to maintain the capital of an insured depository institution. 11 U.S.C |
| Claims for death or personal injury resulting from the operation drug, or another substance. 11 U.S.C. § 507(a)(10).                                 | n of a motor vehicle or vessel while the debtor was intoxicated from using alcohol,   |
| * Amounts are subject to adjustment on 4/01/13, and every three adjustment.  | years thereafter with respect to cases commenced on or after the date of              |

\_\_\_\_ continuation sheets attached

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| In re | Tiffany S Lewis | , | Case No.   |
|-------|-----------------|---|------------|
|       | Debtor          | - | (if known) |

## SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

(Continuation Sheet)

Type of Priority for Claims Listed on This Sheet

|   |          |  |  |                    |                         |          | Type of I flority     | for Claims Liste                     | a on This Sheet  |
|---|----------|--|--|--------------------|-------------------------|----------|-----------------------|--------------------------------------|--|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS<br>INCURRED AND<br>CONSIDERATION<br>FOR CLAIM   | CONTINGENT         | UNLIQUIDATED            | DISPUTED | AMOUNT<br>OF<br>CLAIM | AMOUNT<br>ENTITLED<br>TO<br>PRIORITY | AMOUNT<br>NOT<br>ENTITLED<br>TO<br>PRIORITY, IF<br>ANY |
| Account No.   |          |  |  |                    |                         |          |                       |                                      |  |
|   |          |  |  |                    |                         |          |                       |                                      |  |
| Account No.   |          |  |  |                    |                         |          |                       |                                      |  |
| Account No.   |          |  |  |                    |                         |          |                       |                                      |  |
|   |          |  |  |                    |                         |          |                       |                                      |  |
| Account No.   |          |  |  |                    |                         |          |                       |                                      |  |
|   |          |  |  |                    |                         |          |                       |                                      |  |
| Sheet no. of continuation sheets att of Creditors Holding Priority Claims                         | ached to | Schedule                                 | (T   |                    | Subtotal<br>this pa     |          | \$ 0.00               | \$ 0.00                              | 0.00   |
|   |          |  | (Use only on last page of t<br>Schedule E. Report also o<br>of Schedules.)   | he com<br>on the S | Tota<br>pleted<br>ummar |          | 0.00                  |                                      |  |
|   |          |  | Totals (Use only on last page of the completed Schedule E. If applicable, report also on the Statistical Summary of Certain Liabilities and Related Data.) |                    |                         |          |                       | 0.00                                 | 0.00   |

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B6F (Official Form 6F) (12/07)

| In 1 | re | Tiffany S.Lewis  Debtor |
|------|----|-------------------------|
|------|----|-------------------------|

| Case No. | (if known) |
|----------|------------|
|----------|------------|

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data..

| ☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. |   |  |   |            |              |              |                    |
|--|---|--|---|------------|--------------|--------------|--------------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)  | CODEBTOR  | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UNLIQUIDATED | DISPUTED     | AMOUNT OF<br>CLAIM |
| ACCOUNT NO.  |   |  |   |            |              |              |                    |
| Santander USA<br>P.O. Box 660633<br>Dallas, TX 75266-0633  |   |  |   |            |              |              | 19,000.00          |
| ACCOUNT NO.  |   |  |   |            |              |              |                    |
| University of ILLINOIS<br>839 W Roosevelt Rd,<br>Chicago, IL 60608                                 |   | Y Y                                      |   |            |              |              | 3000.00            |
| ACCOUNT NO.  |   |  |   |            |              |              |                    |
| F.C.S<br>526 Kingwood Drive Suite 309<br>Houston, Texas 77339                                      |   |  |   |            |              |              | 80.00              |
| ACCOUNT NO.  |   |  |   |            |              |              |                    |
| Buck eye check cashing<br>6785 Bobcat Way Ste 200<br>dUBLIN, OHIO 43016-1443                       |   |  |   |            |              |              | 200.00             |
|  |   |  |   |            | Sı           | ıbtotal➤     | \$ 22280.00        |
| continuation sheets attached   | attached  (Use only on last page of the completed Schedule F.)  (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)  \$ 52,820.00 |  |   |            |              | \$ 52,820.00 |                    |

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| n re Tiffany S.Lewis | Case No.   |
|----------------------|------------|
| Debtor               | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)                    | CODEBTOR    | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.      | CONTINGENT | UNLIQUIDATED   | DISPUTED | AMOUNT OF<br>CLAIM |
|--|-------------|--|--|------------|--|----------|--------------------|
| ACCOUNT NO.  |             |  |  |            |  |          |                    |
| CAINE AND WEINER<br>21210 Erwin Street<br>Woodland Hills, CA 91367   |             |  |  |            |  |          | 140.00             |
| ACCOUNT NO.  |             |  |  |            |  |          |                    |
| CONVERGENT OUTSOURCING<br>Convergent Contact Solutions, Inc.<br>219 Perimeter Center Parkway NE<br>ATLANTA, GA 30346 |             |  |  | TTTTAMWAD. | To the state of th |          | 400.00             |
| ACCOUNT NO.  |             |  |  |            |  |          |                    |
| EOS CCA<br>700 Longwater Dr<br>Norwell, MA 02061   |             |  |  |            |  |          | 500.00             |
| ACCOUNT NO.  |             |  |  |            |  |          |                    |
| ENHANCE RECOVERY CO<br>8014 bayberry RD<br>JACKSONVILLE  FL 32256  |             |  |  |            |  |          | 900.00             |
| ACCOUNT NO.  |             |  |  |            |  |          |                    |
| MCSI<br>7330 COLLEGE DRIVE #108<br>PALOS HEIGHT IL   |             |  |  |            |  |          | 200.00             |
| Sheet no. 2 of 4 continuation sheets atta<br>to Schedule of Creditors Holding Unsecure<br>Nonpriority Claims         | ached<br>ed |  |  |            | Subt   | otal➤    | \$ 2140.00         |
|  |             | (Report al                               | (Use only on last page of the so on Summary of Schedules and, if appl<br>Summary of Certain Liabil | icable on  | d Schedu   | istical  | \$ 52,820.00       |

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| In re Tiffany S.Lewis, | Case No.   |
|------------------------|------------|
| Debtor                 | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)            | CODEBTOR    | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.            | CONTINGENT | UNLIQUIDATED         | DISPUTED | AMOUNT OF<br>CLAIM |
|--|-------------|--|--|------------|----------------------|----------|--------------------|
| ACCOUNT NO.  |             |  |  |            |                      |          |                    |
| MIDLAND FUNDING<br>2365 NORTHSIDE DRIVE<br>SAN DIEGO CA 92108  |             |  |  |            |                      |          | 900.00             |
| ACCOUNT NO.  |             |  |  |            |                      | <u> </u> |                    |
| PORTFOLIO RECOVERY<br>140 Corporate Boulevard,<br>Norfolk, VA 23502  |             |  |  |            |                      |          | 400.00             |
| ACCOUNT NO.  |             |  |  |            | :                    |          |                    |
| USA BANK<br>P.O. Box 6335<br>Fargo, ND 58125-6335  |             |  |  |            |                      |          | 800.00             |
| ACCOUNT NO.  |             | -  |  |            |                      |          |                    |
| FIFTH THIRD BANK<br>174 E 154TH<br>HARVEY, IL 60426  |             |  |  |            |                      |          | 300.00             |
| ACCOUNT NO.  |             |  |  |            |                      |          |                    |
| CHASE<br>270 Park Ave,   |             |  |  |            |                      |          | 1000.00            |
| New York, NY 10017   |             |  |  |            |                      |          |                    |
| Sheet no. 3 of 4 continuation sheets atta<br>to Schedule of Creditors Holding Unsecure<br>Nonpriority Claims | iched<br>ed |  |  |            | Subt                 | otal>    | \$ 3400.00         |
|  |             | (Report a                                | (Use only on last page of the c<br>so on Summary of Schedules and, if appl<br>Summary of Certain Liabili | icable or  | d Schedi<br>the Stat | istical  | \$ 52,820.00       |

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|--------------------------------------|-------|----------------|---------------------------|-----------|
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| In re | Tiffany S.Lewis | Case No.   |
|-------|-----------------|------------|
|       | Debtor          | (if known) |

## SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR   | HUSBAND, WIFE,<br>JOINT, OR<br>COMMUNITY | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.        | CONTINGENT | UNLIQUIDATED | DISPUTED | AMOUNT OF<br>CLAIM |
|---|------------|--|--|------------|--------------|----------|--------------------|
| ACCOUNT NO.   |            |  | _  |            |              |          |                    |
| ROBERT MORRIS UNIVERSITY<br>401 S. State Street,<br>Chicago, IL 60605                             |            |  |  |            |              | 774      | 12,000.00          |
| ACCOUNT NO.   |            |  |  |            |              |          |                    |
| TARGET FINANCIAL<br>PO Box<br>581<br>Hays, MT 59527.  |            | 1100000                                  |  |            |              |          | 5000.00            |
| ACCOUNT NO.   |            |  |  |            | <u> </u>     |          |                    |
| WILL LAW MAGISTRATE COURT<br>14 W JEFFERSON ST<br>JOLIET IL 60432                                 |            | ***************************************  |  |            |              |          | 5000.00            |
| ACCOUNT NO.   |            |  |  |            |              |          |                    |
| AFFORDABLE LOANS  |            |  |  |            |              |          | 3000.00            |
| ACCOUNT NO.   |            |  |  |            |              |          |                    |
| Sheet no. 4 of 4 continuation sheets atta   |            |  |  |            |              |          |                    |
| to Schedule of Creditors Holding Unsecure<br>Nonpriority Claims                                   | enea<br>ed |  |  |            | Subt         | otal➤    | \$ 25000.00        |
|   |            | (Report al                               | (Use only on last page of the oso on Summary of Schedules and, if appl<br>Summary of Certain Liabil. | icable on  | d Schedu     | istical  | \$ 52,820.00       |

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| B 6G (Official Form 6G) (12/07) |            |
|---------------------------------|------------|
| In re Tiffany S Lewis ,         | Case No.   |
| Debtor                          | (if known) |

### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

| NAME AND MAILING ADDRESS,<br>INCLUDING ZIP CODE,<br>OF OTHER PARTIES TO LEASE OR CONTRACT. | DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT. |
|--|--|
|  |  |
|  |  |
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|  |  |
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|---------------------------------|-------|----------------|---------------------------|-----------|
| 3 6H (Official Form 6H) (12/07) |       | Document       | Page 22 of 40             |           |

| In re Tiffany S Lewis | Case No.   |
|-----------------------|------------|
| Debtor                | (if known) |

### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| $\square$ | Check | this h | oox if | debtor | has i | വ വ | odebtors |
|-----------|-------|--------|--------|--------|-------|-----|----------|
|           |       |        |        |        |       |     |          |

| NAME AND ADDRESS OF CODEBTOR | NAME AND ADDRESS OF CREDITOR |
|------------------------------|------------------------------|
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |
|                              |                              |

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|          | Fill in this in                | formation to identify                                      | your case:  |  |                |   |  |  |
|----------|--------------------------------|--|---|--|----------------|---|--|--|
| ١,       | Debtor 1                       | Tiffany  | S Lewis   |  |                |   |  |  |
|          |                                | First Name   | Middle Name   | Last Name                              |                |   |  |  |
|          | Debtor 2<br>Spouse, if filing) | First Name   | Middle Name   | Last Name                              |                |   |  |  |
| l        | Jnited States E                | Bankruptcy Court for the:                                  | Northern District of Illin                            | oois                                   |                |   |  |  |
|          | Case number                    | ****   |   | _                                      |                | Check if                                    | this is:   |  |
| L        | (If known)                     |  |   | <del></del>                            |                |   | mended filing  |  |
|          |                                |  |   |  |                |   | oplement showing post-petiti   |  |
| $\cap$   | official F                     | orm B 6I   |   |  |                |   | ter 13 income as of the follow   | ving date:   |
|          |                                |  |   |  |                | MM / D                                      | DD / YYYY  |  |
| <u>5</u> | cned                           | ule I: You   | ır Income   |  |                |   |  | 12/13  |
| se       | ou are sepa<br>parate shee     | arated and your spoi                                       | use is not filing with you<br>top of any additional p | ı. do not include iı                   | nformation abi | aut vour en                                 | you, include information about<br>ouse. If more space is needed<br>known). Answer every question | attach a   |
| 1.       | Fill in your information       | employment<br>n.   |   | Debtor 1                               |                |   | Debtor 2 or non-filing sp  |  |
|          | attach a se                    | more than one job,<br>parate page with<br>about additional | Employment status                                     | Employed                               |                | ikan etakan sungenpenga. An oras asawanga b | Employed Not employed  | netti erreta erreta il seguinte e descriptiva e dell'erreta e dell'erreta e dell'erreta e dell'erreta e dell'e |
|          | Include part<br>self-employ    | t-time, seasonal, or ed work.                              |   | · ·                                    | •              |   |  |  |
|          |                                | may include student ker, if it applies.                    | Occupation  |  | ***            |   | -  | ***************************************  |
|          |                                |  | Employer's name                                       | Conifier He                            | ealth          |   | *  |  |
|          |                                |  | Employer's address                                    | 8151 183rd                             | d st #B        |   |  | 100  |
|          |                                |  |   | Number Street                          | ť              |   | Number Street  |  |
|          |                                |  |   |  |                | <del>~~.</del>                              |  |  |
|          |                                |  |   | Tnley Park                             |                | Code  | City State   | ZIP Code   |
|          |                                |  | How long employed th                                  | ere? 2                                 |                |   | July Suite   | 2.11 0000  |
| _        | art 2: 6                       | Mara Band III ab   |   |  |                |   |  |  |
| _        |                                | iive Details About   |   |  |                |   |  |  |
|          | If you or you                  | ss you are separated.<br>Ir non-filing spouse ha           | ave more than one employ                              | ver, combine the int                   |                |   | rite \$0 in the space. Include you<br>for that person on the lines                               | ır non-filing  |
|          | below. If you                  | need more space, at  | ttach a separate sheet to                             | this form.                             |                | proyoro                                     | parvoir on the mied  | 1  |
| _        | 12.4                           |  |   |  | For            | Debtor 1                                    | For Debtor 2 or non-filing spouse  | :  |
| 2.       | deductions                     | ily gross wages, sala<br>). If not paid monthly,           | ary, and commissions (b<br>calculate what the monthl  | efore all payroll<br>ly wage would be. | 2. <u>\$3</u>  | .000.000                                    | \$   |  |
| 3.       | Estimate a                     | nd list monthly over                                       | time pay.   |  | 3. +\$         | 0.00  | + \$   |  |
| 4.       | Calculate (                    | gross income. Add lir                                      | ne 2 + line 3.  |  | 4. \$_3        | .000.00                                     | \$   |  |

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Case number (if known)\_

| First Name Middle Name Last Name   |             | 0.      | ase number (if i | anown; | 0                                 | *************************************** |
|--|-------------|---------|------------------|--------|-----------------------------------|---|
|  |             | Fo      | r Debtor 1       |        | For Debtor 2 or non-filing spouse |   |
| Copy line 4 here   | <b>→</b> 4. | \$_     | 3,000.00         |        | \$                                |   |
| List all payroll deductions:   |             |         |                  |        |                                   |   |
| 5a. Tax, Medicare, and Social Security deductions  | 5a.         | \$      | 500.00           |        | \$                                |   |
| 5b. Mandatory contributions for retirement plans   | 5b.         | \$      | 0.00             | -      | \$                                |   |
| 5c. Voluntary contributions for retirement plans   | 5c.         | \$      | 0.00             | _      | \$                                |   |
| 5d. Required repayments of retirement fund loans   | 5d.         | \$_     | 0.00             |        | \$                                |   |
| 5e. Insurance  | 5e.         | \$      | 0.00             | _      | \$                                |   |
| 5f. Domestic support obligations   | 5f.         | \$      | 0.00             | _      | \$                                |   |
| 5g. Union dues   | 5g.         | \$      | 0.00             | -      | \$                                |   |
| 5h. Other deductions. Specify:   | 5h.         | +\$     | 0.00             |        | + s                               |   |
| Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.   | . 6.        | \$      | 0.00             | -      | \$                                |   |
| Calculate total monthly take-home pay. Subtract line 6 from line 4.  | 7.          | \$      | 2,500.00         | -      | \$                                |   |
| List all other income regularly received:  |             |         |                  |        |                                   |   |
| 8a. Net income from rental property and from operating a business, profession, or farm   |             |         |                  |        |                                   |   |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  | 8a.         | \$      | 0.00             |        | \$                                |   |
| 8b. Interest and dividends   | 8b.         | \$      | 0.00             |        | \$                                |   |
| 8c. Family support payments that you, a non-filing spouse, or a depend regularly receive   | ent         |         |                  |        |                                   |   |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.         | \$_     | 0.00             |        | \$                                |   |
| 8d. Unemployment compensation  | 8đ.         | \$      | 0.00             |        | \$                                |   |
| 8e. Social Security  | 8e.         | \$      | 0.00             |        | \$                                |   |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assista that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:   | nce<br>8f.  | \$      | 0.00             |        | \$                                |   |
|  | Ģi.         |         | 0.00             |        |                                   |   |
| 8g. Pension or retirement income   | 8g.         | \$      | 0.00             |        | \$                                |   |
| 8h. Other monthly income. Specify:   | 8h.         | +\$     | 0.00             |        | +\$                               |   |
| Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9.          | \$_     | 0.00             |        | \$                                |   |
| Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.         | \$      | 2,500.00         | +      | \$                                | <b>s</b>                                |
| State all other regular contributions to the expenses that you list in Sche Include contributions from an unmarried partner, members of your household, other friends or relatives.  | your d      | epende  |                  |        |                                   |   |
| Do not include any amounts already included in lines 2-10 or amounts that are Specify:   | not av      | ailable | to pay expe      | nse    |                                   | . + \$                                  |
| Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Schedules and Statistical Summary of Columns of Column |             |         |                  |        | oly income.                       | \$Combined                              |
| 3. Do you expect an increase or decrease within the year after you file this No.   | form?       |         |                  |        |                                   | monthly income                          |
| Yes. Explain:  |             |         |                  |        |                                   |   |

Tiffany

Debtor 1

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| Fill in this information to identify your case:  |  |  |  |
|--|--|--|--|
| Debtor 1 Tiffany S Lewis First Name Middle Name Last Name  | Check if this i  | e.   |  |
| Debtor 2   |  |  |  |
| (Spouse, if filing) First Name Middle Name Last Name   | ☐ An amend   | •  | t-petition chapter 13  |
| United States Bankruptcy Court for the: Northern District of Illinois  |  | as of the following  |  |
| Case number(if known)  | MM / DD /  |  | -  |
| (  | A separate   | e filing for Debtor  | 2 because Debtor 2   |
| Official Form B 6J   | maintains  | a separate house   | hold   |
| Schedule J: Your Expenses  |  |  | 12/13  |
| Be as complete and accurate as possible. If two married people are fil information. If more space is needed, attach another sheet to this form (if known). Answer every question.  | ing together, both are equally resp<br>n. On the top of any additional pag   | onsible for supply<br>es, write your nam   | ring correct<br>ne and case number   |
| Part 1: Describe Your Household  |  |  |  |
| 1. Is this a joint case?   |  |  |  |
| No. Go to line 2.  |  |  |  |
| Yes. Does Debtor 2 live in a separate household?   |  |  |  |
| No   |  |  |  |
| Yes. Debtor 2 must file a separate Schedule J.   | enter a service service service and an annual service service and always service service service services and  |  | **************************************   |
| 2. Do you have dependents?   | Dependent's relationship to  | Dependent's  | Does dependent live  |
| Do not list Debtor 1 and Debtor 2. Yes. Fill out this information for each dependent   | Debtor 1 or Debtor 2   | age  | with you?  |
| Do not state the dependents'   | Son  |  | No   |
| names.   |  |  | Yes  |
|  | Daughter   | ***************************************  | L No<br>Z ∨os  |
|  |  |  | ✓ Yes<br>No  |
|  |  | 7100-72  | Yes  |
|  |  |  | No   |
|  |  |  | Yes  |
|  |  |  | . No   |
|  | popularing a second control of the c |  | Yes  |
| Do your expenses include expenses of people other than yourself and your dependents?   |  |  |  |
| art 2: Estimate Your Ongoing Monthly Expenses  | ome district CNS members ger (myrklichen mehr schorte mi as syndrops), (1941) dem cara granz yanda sammyan   | од на 18 година в при на при на 18 година 18 | ann an air aire a' deile ann a duide ann ann, maint a thuir air an Allain an an an aige a' an mainteach a mù |
|  |  |  |  |
| Estimate your expenses as of your bankruptcy filing date unless you a<br>expenses as of a date after the bankruptcy is filed. If this is a supplemental to the control of the | re using this form as a supplemen  | t in a Chapter 13 o  | ase to report  |
| applicable date.   | and Schedule J, Check the box at   | the top of the form  | and fill in the  |
| nclude expenses paid for with non-cash government assistance if you  | know the value   | Solid and the second   |  |
| of such assistance and have included it on Schedule I: Your Income (C  | Official Form B 6I.)   | Your expe  | nses   |
| <ol> <li>The rental or home ownership expenses for your residence. Include<br/>any rent for the ground or lot.</li> </ol>  |  | 4. \$  | 1,200.00   |
| If not included in line 4:   |  |  |  |
| 4a. Real estate taxes  |  | 4a. \$   | 0.00   |
| 4b. Property, homeowner's, or renter's insurance   |  | 4b. \$   | 0.00   |
| 4c. Home maintenance, repair, and upkeep expenses  |  | 4c. \$   | 0.00   |
| 4d. Homeowner's association or condominium dues  |  | 4d. \$   | 0.00   |
|  |  | ·  |  |

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Debtor 1 Tiffany S Lewis Case number (if known) Case number (if known)

|     |  |      | Your ex |        |
|-----|--|------|---------|--------|
| 5.  | Additional mortgage payments for your residence, such as home equity loans   | 5.   | \$      | 0.00   |
| 6.  | Utilities:   |      |         |        |
|     | 6a. Electricity, heat, natural gas   | 6a.  | \$      | 600.00 |
|     | 6b. Water, sewer, garbage collection   | 6b.  | \$      | 0.00   |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services   | 6c.  | \$      | ,      |
|     | 6d. Other. Specify:  | 6d.  | \$      | 0.00   |
| 7.  |  | 7.   | \$      | 400.00 |
| 8.  | Childcare and children's education costs   | 8.   | \$      |        |
| 9.  | Clothing, laundry, and dry cleaning  | 9.   | \$      |        |
| 10. | Personal care products and services  | 10.  | \$      |        |
| 11. | Medical and dental expenses  | 11.  | \$      | 100.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare.   |      | -       |        |
|     | Do not include car payments.   | 12.  | \$      | 150.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books   | 13.  | \$      | 0.00   |
| 14. | Charitable contributions and religious donations   | 14.  | \$      | 0.00   |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.  |      |         |        |
|     | 15a. Life insurance  | 15a. | \$      | 0.00   |
|     | 15b. Health insurance  | 15b. | \$      | 0.00   |
|     | 15c. Vehicle insurance   | 15c. | \$      | 0.00   |
|     | 15d. Other insurance. Specify:   | 15d. | \$      | 0.00   |
| 16, | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:   | 16.  | \$      | 0.00   |
| 17. | Installment or lease payments:   |      |         |        |
|     | 17a. Car payments for Vehicle 1  | 17a, | \$      | 0.00   |
|     | 17b. Car payments for Vehicle 2  | 17b. | \$      | 0.00   |
|     | 17c. Other, Specify:   | 17c. | \$      | 0.00   |
|     | 17d. Other. Specify:   | 17đ. | \$      | 0.00   |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form B 6I). | 18.  | \$      | 0.00   |
| 19. | Other payments you make to support others who do not live with you.  |      |         |        |
|     | Specify:   | 19.  | \$      | 0.00   |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inco   | ome. |         |        |
|     | 20a. Mortgages on other property   | 20a. | \$      | 0.00   |
|     | 20b. Real estate taxes   | 20b. | \$      | 0.00   |
|     | 20c. Property, homeowner's, or renter's insurance  | 20c. | \$      | 0.00   |
|     | 20d. Maintenance, repair, and upkeep expenses  | 20d. | \$      | 0.00   |
|     | 20e. Homeowner's association or condominium dues   | 20e. | \$      | 0.00   |

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| Debtor 1                         | Tiffany   |                                    |   |  | Case number (# known)  |  |     |     |  |
|----------------------------------|---|------------------------------------|---|--|--|--|-----|-----|--|
| First Name Middle Name Last Name |   | Manual Land                        | Case Huttiber (# known)                 |  |  |  |     |     |  |
|                                  | 4   | •                                  | •                                       |  |  |  |     |     |  |
| 21. <b>Oth</b>                   | er. Specify:  |                                    | · ····································· |  |  |  | 21. | +\$ | 0.00                                   |
|                                  | ır monthly exper  |                                    |   | jh 21.   |  |  |     | \$  | 3,000.00                               |
| IIIC                             | result is your mo   | niny expense                       | <b>S</b> .                              |  |  |  | 22. |     |  |
| 23. Caic                         | ulate your monti  | hly net incom                      | ıe.                                     |  |  |  |     |     |  |
| 23a.                             | Copy line 12 (yo  | our combined                       | monthly in                              | ncome) from Schedu   | ule I.   | 2  | 3a. | \$  | 2,500.00                               |
| 23b.                             | Copy your mont  | thly expenses                      | from line                               | 22 above.  |  | 2  | 3b. | -\$ | 3,000.00                               |
| 23c.                             | 23c. Subtract your monthly expenses from your monthly income.  The result is your <i>monthly net income</i> . |                                    |   |  | <b>).</b>  | 2  | 3c. | \$  | -500.00                                |
|                                  |   |                                    |   |  | hin the year after yo  |  |     |     |  |
| morte                            | gage payment to   | expect to finish<br>increase or de | n paying to<br>ecrease be               | or your car loan with<br>ecause of a modifica  | in the year or do you<br>ation to the terms of y   | expect your<br>our mortgage?   |     |     |  |
| N                                | 0.  |                                    |   |  | h af an Alash ann kanlannan pelijang sigit 1 minikka kelasah kipikas da ka sakan samannan.   |  |     |     |  |
| Y                                | es. Explain h   |                                    |   |  |  |  |     |     |  |
|                                  |   |                                    |   |  |  |  |     |     | de e e e e e e e e e e e e e e e e e e |
|                                  | , E1 , C1111 , A, A, A, C1111   |                                    |   |  |  |  |     |     | er ener ennegen                        |
|                                  | :   | //                                 |   | the state of the s | and a first consistent order for the section of the | to a transfer process and process of the part of the control of th |     |     | į                                      |

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B6 Declaration (Official Form 6 - Declaration) (12/07)

| In re | Tiffany S Lewis | , |
|-------|-----------------|---|
|       | Debtor          | • |

| Case No. |            |
|----------|------------|
|          | (if known) |

### **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

| I declare under penalty of perjury that I have read the my knowledge, information, and belief.                         | he foregoing summary and schedules, consisting of sheets, and that they are true and correct to the best o   |
|--|--|
| my knowledge, mioritation, and benefi.   | // // ^  |
| Date 10/08/2015  | Simus Cours Rouses   |
| Date   | Signature: Debter  |
| Date   | Signature:   |
|  | (Joint Debtor, if any)   |
|  | [If joint case, both spouses must sign.]   |
| DECLARATION AND SIGNATU  | URE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)   |
| the debtor with a copy of this document and the notices and promulgated pursuant to 11 U.S.C. § 110(h) setting a maxin | ptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided information required under 11 U.S.C. §§ 110(b), 110(h) and 342(b); and, (3) if rules or guidelines have been mum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum or or accepting any fee from the debtor, as required by that section. |
| Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer   | Social Security No. (Required by 11 U.S.C. § 110.)   |
|  | (Required by 17 0.3.C. § 110.)<br>te the name, title (if any), address, and social security number of the officer, principal, responsible person, or partner   |
| who signs this document.   | one name, me (g any), and soon soon soon y minor of the office, principal, responsible parties   |
|  |  |
| Address  |  |
| X  |  |
| Signature of Bankruptcy Petition Preparer  | Date   |
| Names and Social Security numbers of all other individuals   | who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:   |
| lf more than one person prepared this document, attach add   | ditional signed sheets conforming to the appropriate Official Form for each person.  |
| A bankruptcy petition preparer's failure to comply with the provi<br>18 U.S.C. § 156.                                  | isions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110;   |
| DECLARATION UNDER PENA   | LTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP   |
| l, the   | ne president or other officer or an authorized agent of the corporation or a member or an authorized agent of the  |
| partnership \ of the   | [cornoration or narmership] named as debtor in this case, declare under penalty of perjury that I have   |
| read the foregoing summary and schedules, consisting of<br>knowledge, information, and belief.                         | sheets (Total shown on summary page plus 1), and that they are true and correct to the best of my  |
| Date   |  |
|  | Signature:   |
|  | [Print or type name of individual signing on behalf of debtor.]  |
|  | poration must indicate position or relationship to debtor.]  |
|  | perty: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.   |

§112 and Fed. R. Bankr. P. 1007(m).

#### UNITED STATES BANKRUPTCY COURT

#### Northern District of Illinois

| In re: Tiffany S Lewis  | . Case No.  |
|---|---|
| Debtor  | (if known)  |
|   |   |
| STATEMENT   | OF FINANCIAL AFFAIRS  |
| the information for both spouses is combined. If the ca<br>information for both spouses whether or not a joint peti | ebtor. Spouses filing a joint petition may file a single statement on which se is filed under chapter 12 or chapter 13, a married debtor must furnish tion is filed, unless the spouses are separated and a joint petition is not le proprietor, partner, family farmer, or self-employed professional, |

should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C.

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. If the answer to an applicable question is "None," mark the box labeled "None." If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### **DEFINITIONS**

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of

|      | otor. 11 U.S.C. § 101(2), (31).   | es, armities of the decicl and historis of stori armities, and any managing agent of  |
|------|---|---|
|      | 1. Income from employment of  | operation of business   |
| None | the debtor's business, including pa<br>beginning of this calendar year to<br>two years immediately preceding<br>the basis of a fiscal rather than a co<br>of the debtor's fiscal year.) If a jo | the debtor has received from employment, trade, or profession, or from operation of te-time activities either as an employee or in independent trade or business, from the he date this case was commenced. State also the gross amounts received during the his calendar year. (A debtor that maintains, or has maintained, financial records on lendar year may report fiscal year income. Identify the beginning and ending dates at petition is filed, state income for each spouse separately. (Married debtors filing at state income of both spouses whether or not a joint petition is filed, unless the etition is not filed.) |
|      | AMOUNT  | SOURCE  |

2500.00

Conifer Health

#### 2. Income other than from employment or operation of business

| None         | State the amount of income received by the debtor other than from employment, trade, profession, operation of the                                |
|--------------|--|
| $\checkmark$ | debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If                                 |
| نكا          | joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13                         |
|              | must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |
|              |  |

**AMOUNT** 

**SOURCE** 

#### 3. Payments to creditors

Complete a. or b., as appropriate, and c.

None

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF

AMOUNT

AMOUNT

**PAYMENTS** 

PAID

STILL OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225°. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/

AMOUNT PAID OR AMOUNT STILL

TRANSFERS

VALUE OF

OWING

TRANSFERS

<sup>\*</sup>Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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| B7 (Off   | icial Form 7) (04/13)   |                         |  |                     |   |  |  |  |
|---|---|-------------------------|--|---------------------|---|--|--|--|
| None  | c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 murinclude payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated as a joint petition is not filed.)  |                         |  |                     |   |  |  |  |
|   | NAME AND ADDRESS (<br>AND RELATIONSHIP TO   |                         | DATE OF<br>PAYMENT                                 | AMOUNT<br>PAID      | AMOUNT<br>STILL OWING                   |  |  |  |
| -AA-MAY ON AND AND AND AND AND AND AND AND AND AN | 4. Suits and administrati   | ve proceedings, e       | xecutions, garnishn                                | nents and attachm   | ents                                    |  |  |  |
| None  | a. List all suits and administrative proceedings to which the debtor is or was a party within <b>one year</b> immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)  |                         |  |                     |   |  |  |  |
|   | CAPTION OF SUIT<br>AND CASE NUMBER  | NATURE OF<br>PROCEEDING |  | OR AGENCY<br>CATION | STATUS OR<br>DISPOSITION                |  |  |  |
| None  | b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)   |                         |  |                     |   |  |  |  |
|   | NAME AND ADDRESS<br>OF PERSON FOR WHOS<br>BENEFIT PROPERTY W  |                         | DATE OF<br>SEIZURE                                 |                     | DESCRIPTION<br>AND VALUE<br>OF PROPERTY |  |  |  |
|   | 5. Repossessions, forecl  | osures and retur        | ns   |                     |   |  |  |  |
| None  | List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within <b>one year</b> immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or bot spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.) |                         |  |                     |   |  |  |  |
|   | NAME AND ADDRESS<br>OF CREDITOR OR SELL   | .ER                     | DATE OF REPOSS<br>FORECLOSURE SA<br>TRANSFER OR RE | ALE,                | DESCRIPTION<br>AND VALUE<br>OF PROPERTY |  |  |  |
|   |   |                         |  |                     |   |  |  |  |

#### 6. Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT



b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY 4

CASE TITLE & NUMBER

#### 7. Gifts



List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

TO DEBTOR, IF ANY

RELATIONSHIP

DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

#### 8. Losses



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART

DATE OF LOSS

BY INSURANCE, GIVE PARTICULARS

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY 5

#### 10. Other transfers



a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED



b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S

INTEREST IN PROPERTY

#### 11. Closed financial accounts



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY NAMES AND ADDRESSES OF THOSE WITH ACCESS DESCRIPTION OF DATE OF TRANSFER OR SURRENDER,

IF ANY

6

Y TO BOX OR DEPOSITORY CONTENTS

#### 13. Setoffs



List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF AMOUNT OF SETOFF

#### 14. Property held for another person



List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY

LOCATION OF PROPERTY

#### 15. Prior address of debtor



If debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS

NAME USED

DATES OF OCCUPANCY

#### 16. Spouses and Former Spouses



If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS

DATE OF

**ENVIRONMENTAL** 

OF GOVERNMENTAL UNIT

NOTICE

LAW



b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME

NAME AND ADDRESS

DATE OF

**ENVIRONMENTAL** 

AND ADDRESS

OF GOVERNMENTAL UNIT

NOTICE

LAW



c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business



a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or

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other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

NAME

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN

ADDRESS NATURE OF BUSINESS

BEGINNING AND ENDING DATES

None

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME

ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

#### 19. Books, records and financial statements



a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED



b. List all firms or individuals who within **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME

**ADDRESS** 

DATES SERVICES RENDERED

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|         | c. List all firms or individuals who at the time of the commencement of this case were in possession of the<br>books of account and records of the debtor. If any of the books of account and records are not available, expl |   |  |  |  |  |
|---------|---|---|--|--|--|--|
|         | NAME  | ADDRESS   |  |  |  |  |
|         | d. List all financial institutions, creditors and other parties, includ financial statement was issued by the debtor within two years imp   | ing mercantile and trade agencies, to whom nediately preceding the commencement of t  |  |  |  |  |
|         | NAME AND ADDRESS  | DATE ISSUED   |  |  |  |  |
|         | 20. Inventories   |   |  |  |  |  |
|         | a. List the dates of the last two inventories taken of your property taking of each inventory, and the dollar amount and basis of each  | the name of the person who supervised the inventory.  |  |  |  |  |
|         | DATE OF INVENTORY INVENTORY SUPERVISOR  | DOLLAR AMOUNT<br>OF INVENTORY   |  |  |  |  |
|         |   | (Specify cost, market or other basis)   |  |  |  |  |
|         | b. List the name and address of the person having possession of the in a., above.   |   |  |  |  |  |
|         | <ul><li>b. List the name and address of the person having possession of the in a., above.</li><li>DATE OF INVENTORY</li></ul>   |   |  |  |  |  |
|         | in a., above.   | e records of each of the inventories reported NAME AND ADDRESSES OF CUSTODIAN   |  |  |  |  |
| ******* | in a., above.  DATE OF INVENTORY  | e records of each of the inventories reported  NAME AND ADDRESSES  OF CUSTODIAN  OF INVENTORY RECORDS   |  |  |  |  |
|         | DATE OF INVENTORY  21. Current Partners, Officers, Directors and Shareholders a. If the debtor is a partnership, list the nature and percentage   | e records of each of the inventories reported  NAME AND ADDRESSES  OF CUSTODIAN  OF INVENTORY RECORDS   |  |  |  |  |
|         | DATE OF INVENTORY  21. Current Partners, Officers, Directors and Shareholders  a. If the debtor is a partnership, list the nature and percentage partnership.   | e records of each of the inventories reported  NAME AND ADDRESSES  OF CUSTODIAN  OF INVENTORY RECORDS  of partnership interest of each member of the percentage of interest of each member of the percentage of the corporation, and each stockholder was a soft the corporation. |  |  |  |  |

10

| 22 | Former | partners. | officers. | directors | and | shareholder |
|----|--------|-----------|-----------|-----------|-----|-------------|
|    |        |           |           |           |     |             |

**7** 

a. If the debtor is a partnership, list each member who withdrew from the partnership within one year immediately preceding the commencement of this case.

NAME

**ADDRESS** 

DATE OF WITHDRAWAL



b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within one year immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation



If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during one year immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT. RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.



If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER-IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.



If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER-IDENTIFICATION NUMBER (EIN)

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|   | m 7) (04/13)   |  |
|---|--|--|
| I dec<br>and a  | clare under penalty of pe<br>any attachments thereto                                     | jury that I have read the answers contained in the foregoing statement of financial affind that they are true and correct.   |
| Date  | 10/08/2015   | Signature of Debtor John Recul   |
| Date  |  | Signature of Joint Debtor (if any)   |
| [If con   | mpleted on behalf of a partne  | ship or corporation]   |
| I decla<br>therete  | are under penalty of perjury to and that they are true and co                            | at I have read the answers contained in the foregoing statement of financial affairs and any attachment<br>rect to the best of my knowledge, information and belief.   |
| Date  | ****   | Signature  |
|   |  | Print Name and Title   |
|   | [An individual signing or  | behalf of a partnership or corporation must indicate position or relationship to debtor.]  |
|   |  | continuation sheets attached   |
| P   | enalty for making a false staten   | nt: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571  |
| I declare under p<br>compensation and<br>342(b); and, (3) if<br>petition preparers, | penalty of perjury that: (1) I have provided the debtor wi rules or guidelines have been | RE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)  In a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(b), promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankru of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the maximum amount before preparing any document for filing for a debtor or accepting any fee from the maximum amount before preparing any document for filing for a debtor or accepting any fee from the maximum amount before preparing any document for filing for a debtor or accepting any fee from the filing for a debtor or ac |
| Printed or Typed  | Name and Title, if any, of B   | nkruptcy Petition Preparer Social-Security No. (Required by 11 U.S.C. § 110.)  |
| lf the bankruptcy p<br>responsible person   | vetition preparer is not an ina<br>, or partner who signs this d                         | vidual, state the name, title (if any), address, and social-security number of the officer, principal,<br>cument.  |
|   |  |  |
| Address   |  |  |

Na

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156.

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Document

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B 201B (Form 201B) (12/09)

## United States Bankruptcy Court

|           | <u>Northern</u>   | District Of _       | Illinois  |
|-----------|---|---------------------|---|
| In re     | Tiffany S Lewis   |                     | Case No   |
|           | Debtor  |                     | Chapter   |
|           |   |                     |   |
|           |   |                     | CONSUMER DEBTOR(S)<br>KRUPTCY CODE  |
| attached  | Certification of [Non-At I, the [non-attorney] bankruptcy petition preparer solution, as required by § 342(b) of the Bankruptcy C | igning the debtor's | ruptcy Petition Preparer spetition, hereby certify that I delivered to the debtor the   |
| Printed r | name and title, if any, of Bankruptcy Petition Prepar   | er                  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person, or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.) |
| principal | e of Bankruptcy Petition Preparer or officer,<br>i, responsible person, or partner whose Social<br>number is provided above.      |                     |   |
| Code.     |   | ication of the l    | ached notice, as required by § 342(b) of the Bankruptcy   |
|           | Tiffany S Lewis   | (X                  | hopling Keen  |
| Printed N | Name(s) of Debtor(s)  | Signat              | ure of Debtor Date  |
| Case No.  | . (if known)  | X                   |   |
|           | Date 10/08/2015   | Signat              | ure of Joint Debtor (if any)  |
|           |   |                     |   |
| <u> </u>  |   |                     |   |
|           |   |                     |   |

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) only if the certification has NOT been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.